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ြို့ REISSUE PATENT	APPL	.IC/	<b>ATI</b>	ON	TRANS	MITT	AL	
Address to: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	Attorney Doc. First Named Original Pater ox Patent Application  Attorney Doc. First Named Original Pater Original Pater		ocket No. d Inventor tent Number tent Issue Date //Year) ail Label No.		10659-009  JAMAIL, R.  5,995,457  November 30, 1999  N/A		C821 U.S. Pro 09/897260	
APPLICATION FOR REISSUE OF: (check applicable box)				Design F	Patent	☐ Plant	Patent	
APPLICATION ELEMENTS			A	ССОМР	ANYING APPL	ICATION	PARTS	
1. Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee p.	rocessing)	7.		Transfe	r drawings from P	atent File		
2. Specification and Claims (amended, if appro	priate)	8. ( <i>if applicable</i> )						
Drawing(s) (proposed amendment, if appropriate appropr	riate)	9. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations						
Reissue Oath/Declaration (original or copy) (37 CFR 1.175)(PTO/SB/51 or 52)		10.		English	Translation of Rei	issue Oath/I	Declaration	
5. Original U.S. Patent								
Offer to Surrender Original Patent (37 CFF (PTO/SB/53 or PTO/SB/54)	R 1.178)	11. Applicant claims small entity status, see 37 CFR §1.27						
or Ribboned Original Patent Grant		12.	$\boxtimes$	Preliminary Amendment				
Affidavit/Declaration of Loss (PTO/SB/55)  G. Original U.S. Patent currently assigned?			13. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
Yes No  (If Yes, check applicable box(es))	i	14.		Other:				
Written Consent of all Assignees (PTO/SB/53	3 or 54)							
37 CFR 3.73(b) Statement Power o	f Attorney							
15. NEW CORRESPONDENCE ADDRESS								
Customer Number:  20582  (Insert Customer No. or Attach bar code label here)  Or New correspondence address below								
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COUNTRY		PHONE				FAX		